

Facts About...



HIV/AIDS in Homeless Persons

SUMMARY: Although there have been no local population-based surveys of HIV infection in the homeless in King County, studies from other areas of the country indicate that homeless men and women are at higher risk for HIV. Homeless persons reported with HIV/AIDS in King County were more likely to be persons of color and to have been exposed through injection drug use compared to those who were not homeless.

STATUS OF HIV/AIDS CASES:

- In King County HIV Registry, homelessness is defined as having no resident zip code at time of the HIV or AIDS diagnosis. This definition may undercount the number of homeless HIV/AIDS cases if, for example, the zip code of a shelter or friend's home was reported as the zip code of residence. Ninety-two (2%) of the 4,963 King County residents living with HIV or AIDS were reported as homeless.
- Among homeless persons with HIV/AIDS, 48% were persons of color and 65% were either injection drug users (IDUs) or men who have sex with men and also inject drugs (MSM/IDU) compared to 27% and 15%, respectively, among persons who were not homeless at diagnosis.

King County Residents Living with HIV or AIDS as of June 2002

	Homeless		Not Homeless	
	Number	(%)	Number	(%)
Sex				
Male	78	(85)	4,431	(91)
Female	14	(15)	440	(9)
Age				
0-19 years	5	(5)	121	(2)
20-24 years	10	(11)	481	(10)
25-29 years	16	(17)	979	(20)
30-39 years	43	(47)	2,131	(44)
40-49 years	13	(14)	906	(19)
50+ years	5	(5)	253	(5)
Race/Ethnicity				
White	48	(52)	3,579	(73)
African American	31	(34)	702	(14)
Hispanic	6	(7)	399	(8)
Asian/Pacific Islander	0	(0)	105	(2)
Am Indian/AK Native	7	(8)	77	(2)
Unknown Race	0	(0)	9	(0)
HIV Exposure Category				
Male/male sex (MSM)	23	(25)	3,462	(71)
Injection drug user	35	(38)	306	(6)
(IDU)				
MSM/IDU	25	(27)	418	(9)
Heterosexual sex	3	(3)	308	(6)
Other (blood products or undetermined)	6	(8)	377	(8)
TOTAL	92	(100)	4,871	(100)

POPULATION SIZE:

- The McKinney Act (Public Health Law 100-628, November 7, 1988) defines a homeless person as: "an individual who lacks a fixed, regular, and adequate residence or an individual who has a primary night-time residence that is either:
 - a supervised or publicly operated shelter designed to provide temporary or transitional living accommodation; or
 - a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings."
- Approximately 5,500 persons (500-2,000 of whom are youth) are homeless in King County on any given day, and an estimated 25,000 persons have experienced homelessness in the past year. Unsheltered persons outside of Seattle are the least documented segment of King County's homeless although the annual One Night Street Count was expanded to some of these areas in 2002.
- The 2002 One Night Street Count found an 18% increase in people surviving outside when comparing areas counted in 2001 with like areas in 2002. Forty-five percent of the people found were men, 8% were women, 2% were minors (under 18), and 45% were of unknown gender and age.
- Homelessness is a particular concern among injection drug users in King County. In a Public Health survey of 1,824 drug injectors at the King County Correctional Facility interviewed between 8/98 and 7/02, 60% reported having no permanent residence prior to their arrest.

HIV PREVALENCE:

- In HIV prevalence surveys conducted by the Centers for Disease Control and Prevention between 1989 and 1992 in health clinics serving the homeless in 10 different cities (not including Seattle), the median HIV prevalence was 3.3%.¹
- Unlinked surveys of drug users entering treatment in King County between 1997 and 1999, showed that 8% had no permanent address. Those with no permanent address were more likely to test positive for HIV infection (2.5% vs. 1.4%).
- A 1997 survey of homeless persons attending a downtown Seattle clinic serving a large homeless population found no HIV positives among 103 persons tested (95% confidence interval 0-3.5%).

BROADER ISSUES AND DATA GAPS:

- HIV infection is one of many serious issues facing the homeless. In order to develop effective prevention/intervention programs for this population, the causes of homelessness and its association with mental illness and substance use problems need to be better understood and better addressed.
- Improved characterization of demographics, risk behaviors, and health status (including HIV, other STDs, TB, substance use, and mental illness) among the homeless is also important.
- Tuberculosis cases among homeless persons increased in King County in 2002. In the first 10 months of 2002 22 cases of TB were diagnosed among homeless persons compared to 12 – 15 cases per year reported each of the past six years, except for 1998 when King County experienced a previous increase in TB transmission associated with homelessness and HIV infection. Thirty-two percent of the 22 TB cases were co-infected with HIV.

¹Allen DM, Lehman JS, Green TA, et al. HIV among homeless adults and 'run away youth' 1989 - 1992. **AIDS** 1994;8:1593-1598.